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FROM:

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Art Unit 3732/Examiner Michael Priddy

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No. of Pages (including this): 19

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Ferraro

Subject: U.S. Patent Application No. 09/970,294

Date:

October 7, 2004

Gary K. Michelson, M.D.

Filed: October 2, 2001

Confirmation Copy to Follow: NO

SCREWS OF CORTICAL BONE AND METHOD OF

MANUFACTURE THEREOF Attomey Docket No. 101.0070-02000

Customer No. 22882 Confirmation No.: 2538

Message:

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the attached Transmittal Form (in duplicate) and Amendment After Final are being facsimile transmitted to the U.S. Patent and Trademark Office on October 7, 2004.

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FORM PTO-1083

Attorney Docket No.: 101.0070-02000 Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gary K. Michelson, M.D. Serlel No: 09/870,294 Flied: October 2, 2001 For: SCREWS OF CORTICAL BONE AND METHOD OF MANUFACTURE THEREOF

Confirmation No.: 2638

Art Unit: 3732 Examiner: M. Priddy

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1460

Doer Sir:

Transmitted herewith is a reply to the Final Office Action of July 13, 2004 in the above-identified application.

No additional fee is required.

Applicant hereby requests a ***-month extension of time to respond to the above office action.

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMB PREVIOUSLY PAID		(Col. 3) PRESENT EXTRA*	E GNTTI		FRE	25°E
TOTAL CLAIMS FEE	109	1-1	100	••	•	LQ=\$15 EM=\$9	\$15		0
INDEPENDENT CLAIMS FEE	G		6			LG=586 8M=543	£66		0
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							TOTAL	8	•

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\$_____ to cover the additional claims fee is enclosed.
to cover the ***-month extension of time fee is enclosed. A total fee in the amount of \$_

A total fee in the amount of \$______ to cover the additional claims fee is enclosed.

A fee in the amount of \$_____ to cover the **-month extension of time fee is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 60-1088. A copy of this sheet is enclosed.

Any fitting fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted, MARTIN & FERRARO, LLP

Date: October 7, 2004

1557 Lake O'Pines Street, NE Hartville, Ohio 44632 Telephone: 330-877-0700 Facsimile: 330-877-2030

Transmittel of Amendment DOC

Ferraro

129

FORM PTO-1083

Attorney Docket No.: 101.0070-02000 Customer No. 22862

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Gary K. Michelson, M.D.
Serial No: 09/970,294
Filed: October 2, 2001
For: SCREWS OF CORTICAL BONE AND
METHOD OF MANUFACTURE THEREOF

Confirmation No.: 2538

Art Unit: Examiner:

Mail Stop AF Commissioner for Patents P.O. Box 1460 Alexandris, VA 22313-1460

Door Sir:

Transmitted herowith is a reply to the Final Office Action of July 13, 2004 in the above-identified application. No additional fee is required.

Applicant hereby requests a ***-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

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TOTAL CLAIMS FEE	100	1-1	109	1	•	LG=\$18 SM-\$6	\$10	•	•
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less than the entry in Col. 2, write "0" in Col. 3.

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A total fee in the amount of \$_____ to cover the additional claims fee is enclosed.

A fee in the amount of \$____ to cover the ***-month extension of time fee is enclosed.

A fee in the amount of \$____ to cover the ***-month extension of time fee is enclosed.

The Commissioner is nereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1088. A copy of this sheet is

zed. Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted, MARTIN & FERRARO, LI

Date: October 7, 2004

1667 Lake O'Pines Stroot, NE ristrtville, Ohio 44632 Telephono: 330-877-0700 Facsimile: 330-877-2030

By:

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OCT 0 7 2004

PATENT Attorney Docket No. 101.0070-02 Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Confirmation No.: 2538
Gary K. Michelson)	
Serial No.: 09/970,294		Group Art Unit: 3732
Filed: October 2, 2001	,	Examiner: M. Priddy
For SCREWS OF CORTICAL BONE AND)	
METHOD OF MANUFACTURE	.)	
THEREOF)	

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

AMENDMENT AFTER FINAL

In reply to the Final Office Action dated July 13, 2004, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 15 of this paper.